

AO 435 (Rev. 03/08)		Administrative Office of the United States Courts		<b>FOR COURT USE ONLY</b>	
<b>TRANSCRIPT ORDER</b>				<b>DUE DATE:</b>	
<i>Please Read Instructions:</i>					
1. NAME <u>Elvin Ramos</u>		2. PHONE NUMBER <u>212-513-3590</u>		3. DATE <u>8/2/12</u>	
4. MAILING ADDRESS <u>Holland &amp; Knight 31 W. 52nd St</u>		5. CITY <u>NY</u>		6. STATE <u>NY</u>	7. ZIP CODE <u>10019</u>
8. CASE NUMBER <u>2:12 CIV. 74</u>	9. JUDGE <u>mg Judge Dowsley</u>		DATES OF PROCEEDINGS		
10. FROM <u>5/1/12</u>		11. TO <u>5/1/12</u>		LOCATION OF PROCEEDINGS	
12. CASE NAME <u>Ddendorff v. Grand China</u>		13. CITY <u>Corpus Christi</u>		14. STATE	
15. ORDER FOR					
<input type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT	
<input type="checkbox"/> NON-APPEAL		<input checked="" type="checkbox"/> CIVIL		<input type="checkbox"/> BANKRUPTCY	
		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER (Specify)	
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)					
PORTIONS		DATE(S)		PORTION(S)	
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)					
<input type="checkbox"/> OPENING STATEMENT (Defendant)					
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)					
<input type="checkbox"/> OPINION OF COURT					
<input type="checkbox"/> JURY INSTRUCTIONS				<input type="checkbox"/> OTHER (Specify) <u>MOTION</u>	
<input type="checkbox"/> SENTENCING				<u>Hearing</u>	
<input type="checkbox"/> BAIL HEARING					
17. ORDER					
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
EXPEDITED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NO. OF COPIES		
DAILY	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NO. OF COPIES		
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	
18. SIGNATURE <u>Elvin Ramos</u>		<input checked="" type="checkbox"/> EMAIL ONLY REQUIRED			
		<input type="checkbox"/> EMAIL AND HARD COPY REQUIRED			
19. DATE <u>8/2/12</u>		<input type="checkbox"/> EMAIL ADDRESS: <u>Elvin.Ramos@HKLAW.COM</u>			
20. TRANSCRIPT TO BE PREPARED BY		COURT ADDRESS			
ORDER RECEIVED	DATE	BY			
DEPOSIT PAID				DEPOSIT PAID	
TRANSCRIPT ORDERED				TOTAL CHARGES	
TRANSCRIPT RECEIVED				LESS DEPOSIT	
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED	
PARTY RECEIVED TRANSCRIPT				TOTAL DUE	

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